

# 30 Days to Better Doctoring

@DrEricLevi

I know, I know. It takes more than 31 days to be a better doctor. And yes, I know, it's a stupid challenge, you're too busy and you've got better things to do. And yes, I know, doctoring is way more complex than doing stuff like these.

Look, I just wanna have fun. I've decided to set myself 31 simple acts I can do daily during the month so I can fine tune my heart and head towards becoming a better doctor. I thought I might share these 31 Simple Acts with you and ask you to join me in this campaign. It's like a group of friends doing random secret acts of kindness for others. No fame, no glory, no money. Just ordinary doctors intentionally tweaking a minor part of their day and upping the ante on positivity wherever we are working.

All of you good doctors out there are already doing these. I've learned these simple acts from you. I'm going to try to put those habits in place so I too can be a better doctor like you.

So every morning, I'll be tweeting a little challenge. Something simple we can do at some stage during the day to move towards better doctoring. It's not going to be "Find a cure for cancer" or "Do a PhD". It will be simple little acts of doctoring.

Remember, I wrote this for myself. You don't have to do any of these. But yes, it will be nice to have friends do these together with me. It will be great to hear your story too.

## *Day 1: Back to Basics*

Write down in as few words as possible why you did medicine/surgery in the first place, and keep it somewhere visible. A post it note on the computer, a note on the iPhone home screen, a scribble on the dorsum of your hand, anywhere visible to you. You can even tweet it or change your twitter bio to it or update your facebook status with it. Why did I become a doctor? Why did I choose \_\_\_\_\_(your specialty)? Fame, fortune, fashion, feeling, family, faith? Write anything down as long as you know that this is the big picture that will keep you staying the course when the going is rough. We get stressed because we tend to get lost in the details. Remind yourself of this big picture a few times today.

## *Day 2: Stop and say Hello!*

We're busy. We walk past many people every day in hospitals. We walk into the operating theatre and demand things done quickly and efficiently. We walk into the wards, do our rounds swiftly and leave. What happens if we stop intentionally and specifically several times during the day to say hello to those we often meet but take for granted? Our colleagues from other specialties, nurses, physios, pharmacists, clerks, receptionists, etc. How would others respond when they see a busy physician

or surgeon stop intentionally for 30 seconds to ask them how they are and their family? Will it leave them with an encouraging impression? Will it help us realize that people we work with do matter?

## *Day 3: Communicate Clearly*

It is well known that doctors are not usually great communicators verbally, and even worse at the written form of communication. I know, I know. Writing is hard for us doctors. But 10-year-olds can do it, so it shouldn't be that hard. I've been asked many times to decipher some doctor's writings, and it's difficult. Messages get lost, orders get misinterpreted, and much time is wasted on clarifying information. Much of medical errors in hospitals often occur at the communication level, both verbal and written. Since communication is essential in team work and patient care, as doctors, we should respect our colleagues and patients by making an intentional effort to communicate clearly, both in verbal and written form. Progress notes, operation records and request slips are places where we can better our writing. Ward rounds, emergency departments and multidisciplinary team meetings are places where we can sharpen our verbal skills. Work hard today to be succinct, legible and clear.

## *Day 4: Please Explain*

'Doctor' came from the latin word 'docero', which means 'Teacher'. Our primary duty is to teach. But teaching has been much excluded from our day-to-day activities. Patients, sadly, have told me several times, "You're the first doctor who has ever explained that to me." So today, make an intentional effort to explain things to patients clearly. Explain the disease, the investigations and the solutions. Explain the plans and expected outcome, good or bad. Draw pictures! Patients love drawings and would want to keep your artistic masterpiece. A simple explanation goes a long way in alleviating much of patient anxiety. Your explanation may be the key to patient satisfaction and patient confidence in you.

## *Day 5: Learn Something Else*

Grab the opportunity today to learn something that is totally unrelated to medicine and surgery. Then tell someone what you've learned. Pick up a book on whales. Google up how to make origami. Watch a documentary. Learn how to build a birdhouse. Something totally new and different. Surprise yourself, and someone else. What you learn today adds flavour to who you are. You should not allow medicine and surgery to be the only thing that defines you. Keeping an interest outside of medicine and surgery is a fun and necessary thing to do. Adds colour to your days, melodies to your life and it may take you down surprising paths of new discoveries you've never considered before.

### *Day 6: Toss Technology*

For a few hours today (or all day if possible), switch off all technology and be with your friends and family. Yes, turn off the iPhone, iPod, iPad, iPad Mini, Samsung, Laptop, TV, radio, DVD, Nintendo, Facebook, Twitter, Instagram, etc. Disconnect from technology and be physically and mentally present with your friends and family. It's really hard. But it's worth an effort. Reflect on how dependent you are on technology, and discover that you do not need technology to be fully alive with your loved ones. You do not need Facebook, Twitter, MySpace, blogger etc. to validate your identity. When you are truly refreshed by being fully present with your family and friends, you might be a happier doctor come morning.

### *Day 7: Touch your Patients*

Patients come to the clinic and operating table expecting to be touched, clinically, humanly, and emotionally. It goes beyond the routines of physical examination. The touch on the hand, the squeeze on the shoulder, the hand on the back as they walk, all work towards providing hope, encouragement and comfort. In fact, it is these touches that patients sometimes remember more than your quoted survival statistics. Do it today. Touch your patients, with consent and compassion. It may be the most important thing you can do for your patients today.

### *Day 8: Thank a Nurse*

The original title was meant to be "Touch a nurse", but as a surgeon, it is not appropriate for me to suggest that doctors should be touching nurses willy-nilly. So, instead, go thank a nurse. Thank one of your hardest working colleagues. Find a special way, rather than simply saying "Thank you". Buy a little gift, clean up after your own mess, buy coffee for the whole ward, help walk a patient to the toilet, help make up a bed (though I bet you'll do a worse job than them), etc. There are many ways you can thank the nurses you work with everyday. Do it well today and see how they respond.

### *Day 9: Be Quiet*

Today might be a really hard challenge for some of us: be quiet. In your consultations today with patients, try and utilise silence as a tool. Make a real attempt today to leave moments of silence in your conversations. See what would happen if you held back and simply allow your patients to talk. Do not interrupt. Let them share. Perhaps, affirm them with a little "uh huh, right, ok, I hear you." Or even simply repeat back to them the last thing they said. Let them go uninterrupted for as long as possible. It

might feel like eternity, but I'm almost certain it will be less than 60 seconds before you might jump in to ask targeted questions. Relax, be quiet, and surprise yourself.

### *Day 10: Do Someone Else's Job*

I'm serious. Have a look around the ward, the clinic or your operating theatre. Each person you work with are highly trained in what they do. Each of your colleagues are treasures of knowledge, experience and skills. Today, pick up a new skill, or refresh yourself on an old skill. If you're a surgeon and have not held an anaesthetic face mask in a long time, ask to hold one as the patient goes to sleep. Put in an IV cannula, intubate a patient, write the drug chart, help a nurse draw up some antibiotics, check in a patient, draw some blood, fax a letter, book a patient into clinic, escort a patient to the ward, call a taxi for a patient, sit in with a pharmacist as they educate patients, change a wound dressing, etc. The options are boundless. Be reasonable though, do not put anyone at risk. Try today to be in someone else's shoes and perform a duty that you do not normally perform. It will stretch your courage and humility. Good luck.

### *Day 11: Smile a Little More*

I suspect this may be honestly quite hard for many of us hardened doctors and intense type A narcissistic surgeons. Try it. Smile a little more than usual. You don't have to be weirdly happy like you were taking excessive happy pills. Just put on a gentle smile that is a little more than your usual natural predisposition. See how that smile would affect your mood and how others respond to your smile. Smile at strangers you meet in hospitals. I am certain it would make you a little happier and make others a little happier to be around you. Go on. Break your own record. See if you can smile the longest ever in your life today.

### *Day 12: Family First*

I love the TV series 'Modern Family'. Despite their quiriness and dysfunctionality, they always put the Family First. As doctors, I suspect our families play a huge part in allowing us to be where we are today. All the missed birthdays, dinners, school concerts, holidays because of our work. We come from various different family backgrounds. There has never been a perfect family. You may have been well supported by your family through your medical training, but you may also have faced many challenges from your family and you've become who you are despite your family backgrounds. When you think of your family, some may think of love and acceptance, while others think of hurt and pain. My heart goes out to you. Today, no matter what your family looks like spend some time thinking about them. Today may be a time to write that letter of thanks and love. Today may also be the time to write

that painful email asking for forgiveness. Today may be a day of joy and celebration, or tears and reconciliation. A phone call, an email, a letter, a card, a coffee date, a meet up at the park may just turn this day into a memorable one for you and your family. When you are able to celebrate the gift that is a family in all its shape and form, you will be better able to appreciate your role in supporting your patients and encouraging their families. Accepting your family is a great step to understanding and supporting your patients and their families. I wish you courage today to do what your heart is urging you to do.

### *Day 13: Find a Hero*

Go find a hero. We humans are natural at secretly wanting to be like someone else. We have a natural tendency to emulate something good we see in others, or for that matter, something bad. We idolise, we copy, we mimic. Today, find a hero and see if you could discover more about his or her life through books, internet or the social media. Find a mentor you respect, a doctor you admire, or even someone from non-medical background. Read a bit about their life and achievements, and then note down a few basic attributes that they have. See if those attributes are ones that you can adopt in your day-to-day practice to make you a better doctor. Have fun.

### *Day 14: No Whining*

No whining. No whinging. No complaints. No negativities. No bull-dust. Can we try that for one day? The hospitals and work environments are toxic already in itself, we don't need to add more fuel to the pressure cooker. Do not respond to any 'bitching about', 'yakking' or negative comments. Do not add any gossip or bad opinions to a conversation full of bitterness. Do not say anything negative about a fellow colleague, another specialty, admin, patients, nurses, or anyone else. If you are tempted to say something bad, just resist. Go away and have some chai tea. Today, be the voice of positivity, optimism and hope. Drop any whinging, whining or complaints for a day and see what happens.

### *Day 15: Have a Break*

I confess this is not an easy one for me. I can go for a full day without any break, only on 3 cups of coffee and no other oral intake. Life is busy and I want to get my patients better sooner. I admit, though, that I become rather impatient and snappy when that happens. I am learning to take quick pit stops during the day to rejuvenate. I've been known from time to time to hide in the library or the resident's quarters for a 15 min power nap. I've also taken time to run to the hospital chapel to be still for a few minutes. Do take time to stop and refresh yourself. Put your iPod on. Go find a quiet

room. Grab a coffee and sit at a park. Be still for a few minutes. It may just give you the boost and clarity of mind you need to perform even better.

### *Day 16: Surprise the Secretary*

Remember that hospitals can't function without secretaries, administration, clerks and many other desk warriors. These people hiding behind their desks and computers facilitate appointments, book operating cases, order equipments, and perform many other tasks that make our life easier. In patient care, they are an essential part of the team, but unfortunately they don't often get a mention. Without them, our clinical work is affected. They are there, as much as we are, for the sake of the patients. So go on and thank them. Stick a post it note on their computer screen that says "Well done". Buy flowers. Get a new desk ornament for them. Get a fancy pen or microphone head piece. Anything that would make their clerical duties memorably appreciated.

### *Day 17: Drop Distractions*

The modern world is a world full of distractions. Relentless TV ads, phone interruptions, mobile notifications, pagers, emails, etc all crowd our minds. Sometimes with good things, often times with unnecessary distractions. When you look through your day, are there distractions that take you away from the job at hand? Sometimes, those distractions are dangerous, such as distractions when you're operating or writing a drug chart. Mostly, though, these distractions are simply time thieves. They take a little here, a little there, and before you know it, you've wasted your time on TV, radio, google, YouTube, Facebook, Twitter, magazines, etc. Think about what distracts you and steals your precious time and see if you can drop them today so that you can be a more focused and efficient doctor. Facebook, Twitter, YouTube, Newspaper, TV, radio, emails, video games, on line shopping, gossiping, etc. All of these are not evil in themselves, but they are potential time thieves and distractors. Before you can do great things, there must be things you cannot do.

### *Day 18: Discover Your Patients' Passions*

A good way to make your consulting life more interesting is to explore your patients in a different way. As doctors, we are not just students of diseases. We are students of life, for life. The more we learn about the habits and lifestyles of our patients, the more we will know how best to help them. So today, discover something new about your patients. Surprise them and surprise yourself. In the midst of your consultation, ask: "So tell me, what's your hobby?", "What do you do to make you happy?", "What makes you tick?", "What do you love to do with your days?" See where the conversation takes you. The few times that I've done this, I've been absolutely

impressed by how amazing my patients are. Go find their passions and learn something novel today.

### *Day 19: Walk Away*

Doctors are busy, interruptible, distracted people. Today, go against your body rhythm. Spend 15 minutes (or longer) by yourself with no phones, internet, TV or radio. Leave the phone at home and go for a walk around the neighbourhood. Take a short train ride. Drive and park in a corner somewhere. In the silence, let your mind wander and wonder. What would you say to yourself? What would you hear? Get some peace and quiet. See how refreshing a little solitude would be. Perhaps in the quietness of your mind you might find a critical solution to some of your personal or professional clinical problems. Good luck.

### *Day 20: Email Admin*

In most of the hospitals I've worked in, there is often a big chasm between clinicians on the ground and hospital administration in their ivory towers. Doctors and nurses see patients. Administration see numbers. My goal is to get the patient well. Their goal is to balance the books. We employed those with administrative skills so that we can be more efficient at doctoring and nursing. However, as it often happens, the managers become money managers and productivity directors. I have met many outstanding administrators whose visions and plans for the hospital are commendable. But I've also met many more who forget that their primary goal is patient outcome. Today, write an email or note to your non-clinical, hospital or practice managers. Thank them for their hard work and their efforts for the hospital or practice you're at. Tell them how important is their work for the patients. Give them the right perspective on the purposes of the practice. Remind them, gently, that their primary goal is not profit, but patients.

### *Day 21: I Dreamed a Dream*

Do you have a dream? Have you got a picture of how your doctoring would look in the future? What kind of achievements? What superspecialty? What specific things you'd like to be remembered for? What your clinic would look like? What your hospital would look like? What health care in your country would look like? Wouldn't it be wonderful if each of us doctors could dream of a better hospital, a better health care system? Well, why not? Why don't you put down on a piece of paper what your ideal health care system and facility would look like. Just play with me and imagine. Dream of that ideal hospital, ideal policies, ideal access for patients, etc. Put it down on paper, or iPhone or iPad. Let that dream simmer in our mind for a few days. If that idea has

taken hold of you, take a step further and plan how you can help turn that dream into a reality through specific strategies. Good luck.

### *Day 22: See the Unseen*

It takes an army of workers to make a hospital run. There are many, many unseen employees in every hospital working for the good of the patients. As doctors, we are often seen as the face of the hospital, but we know that we would not be able to work effectively without the help of so many others. Today, make a special effort to see those unseen workers. See them, smile at them and thank them. See the janitors, cleaners, porters, security guards, engineering, kitchen services, receptionists, switchboard operators, operating theatre sterilisers, lab technicians, etc. There are hundreds of unseen quiet workers in the hospital. A tap on their shoulders with the words, "Thank you. My patients and I appreciate your good work" may just make their day.

### *Day 23: Thank the Allies*

Doctors never work alone. Patients are best served when doctors work well with allied health. I can easily list the allied health workers that ENTs work with very closely: nurses, pharmacists, audiologists, speech and language pathologists, physiotherapists, nutritionists, social workers. What about your specialty? Who do you work with? Take time today to thank them and appreciate them. It will build a stronger working relationship that will benefit your patients.

### *Day 24: Slow Down*

You are always running, probably. I know I used to. I used to always run between theatre, emergency, the ward, clinic, preoperative holding bay, recovery, etc. I need to run so I can pack more things into my day and spread myself thinly over many things. In the midst of running, I often realise that I am less effective and less helpful to others. I project this air of busy-ness and keep others at a distance so they won't bother me. But I'm learning now to slow down and purposely hold my thoughts longer. I'm learning to slow down during rounds so I can spend a bit more time with patients, and allow students and nurses to stop me and ask me questions. I slow down enough to make me interruptible and approachable. I slow down enough to allow my mind to think clearly. I sit on the patient's bed. I sit on the nurses desk. I slow my footsteps. Interestingly, I still get the same amount of stuff done (or not done) during the day whether I am at 110mph or just on slower speed. I am realising that slowing down is good for me, my colleagues and my patients. Try that.

### *Day 25: Hold Your Tongue*

Hospitals are pressure cookers. Working in hospitals involve dealing with pressures at all times: time pressures, clinical demands, urgent matters, sick patients, excessive workload, mounting paperwork, challenging procedures, etc. In the midst of high tension and pressure situations, egos get rubbed, tempers flare, and sharp, hurtful words get thrown about. Even on days with less pressures, sometimes our communication often involve cynical and sarcastic remarks about colleagues, patients, other specialties and allied health staff. Let me challenge you today to hold your tongue. Hold back on any sarcastic comments or negative words you are about to say. Just hold it and let the comments pass. Don't even justify anything. Just smile and keep quiet. See how that will change your mood. Hold no grudges. Live lightly and live well.

### *Day 26: Record Some Wrongs*

To err is human. Doctoring is human. If we are honest with ourselves, there will always be mistakes we can admit to and things we can do better. We are trained in this. As a trainee surgeon, in particular, I am trained to continually audit my performance. I measure my outcomes, record my complications, scrutinise my results. My logbook is updated daily with surgical numbers, techniques, outcomes and complications. But what about the non-operative aspect of my doctoring. Have I ever measured how many times I've been stressed out, rude to nurses, chose the wrong analgesic, arrived late in theatre, not clarified my plans enough to patients, failed to communicate with the GP, wrote illegibly, etc. Take time today to think about the last few days. Write down the things that could have been done better and how it could have been done better. It may involve technical matters of doctoring, or the non-technical ones.

### *Day 27: Record Some Rights*

Which is harder? Writing down the bad stuff you've done, or the good ones? Yesterday you wrote about the things that you could have done to improve your game. The wrongs that could have been made better. Today, write down the events in the past week where you have done well. Think about your interactions with your patients, the procedures you've done, the jokes you shared with the nurses, the plans you've set for your patients, the drugs you chose, the presentations you've made, even the clothes you wore. The ability to fairly assess your performance as a doctor is important. In the current context of cynicism and negativity at workplaces, it is always important to be able to assess your own performance and determine how well you are doing. Celebrate the good you've done.

### *Day 28: Thank the Boss*

Throughout my training I've found that even the hardest bosses are really softies at heart. Some of the nastiest surgeons I've met turn out to be very reasonable and friendly mentors once you get to spend time with them. It's just that they don't let too many people come close to them and they demand perfection from everyone working with them. That gives them an air of unapproachability, though they're really human beings wanting to do their best for their patients. I've actually fallen in love with some of these hard to break surgical bosses. In fact whenever I start with a new unit I still make it a point to identify the 'hardest' boss in that unit and aim to 'turn him/her around'. I make it my goal to soften the hardest boss. And surprisingly, it always starts with appreciation. So today, do something to appreciate your bosses. A word, a card, a gift, etc. Surgeons and bosses are people who also need to know that they're doing well in their work. They too need feedback and appreciation.

### *Day 29: Teach, Teach, Teach*

'Doctor' comes from the Latin word 'docere', meaning 'teacher'. 'Surgery' comes from the Latin 'chirurgia', or Greek 'kheirourgia', meaning 'working with hands'.

I believe as a surgeon I am called to be a teacher who works with my hands.

The primary duty of a doctor/surgeon is to teach. To teach patients how to live better. To teach students the causes and treatments of diseases. To teach nurses how to care for patients. To teach families how to support a patient in need. To teach, teach and teach. You've heard it said before, "Give a man a fish, and you'll feed him for a day. Teach a man to fish, and you'll feed him for a life time." And that is true. Caring for one person for a day limits my impact. Teaching how to care for a person will teach the patient, their families, their carers, their nurses, my students, colleagues, and many others the art and science of better living. Teaching is foundational to the legacy of health I will leave with my patients and the doctors after me. Long after I've laid down the scalpel, it is my legacy of education that will continue to bear fruits of healthy outcomes. By teaching, I do not mean a transfer of information. No, the photocopier does that. Teaching, to me, is primarily measured by a change of action or behaviour resulting from an educated mind. A life change, like stopping smoking, caring for ear health, vocal hygiene, etc, are the outcomes of my teaching as a doctor. Antibiotics and surgery are just some of my tools. And when I see a non-ENT doctor being good at managing BPPV, otitis externa, chronic rhinosinusitis, salivary stone, etc. then only have I done my duty as an ENT surgeon. Teaching is not focused on the teacher, but the student. Teaching a patient to stop smoking requires a different technique to teaching a medical student the biochemical carcinogenic effects of smoking.

Every moment is a teachable moment. Not a lecture session, but a teachable moment. Be proactive in teaching today. Fulfill your ancient Latin calling as a doctor/teacher.

### *Day 30: Love Your Work*

Someone said that the secret to happiness is not in doing what you love, but in loving what you do. As doctors, we are in such privileged positions. We get to practice our art and help others along the way. As medical students, we fell in love with medicine. But as we grew up in medicine, we get lost in the busyness, stresses and demands which are inevitable parts of a career. We get hypnotised by the temptation of money and fame. Along the way, we lost our love of medicine. We lost the reasons why we entered medicine in the first place. We lost the child-like awe and excitement that used to greet our days at the hospitals. We lost the inquisitive curiosity that used to fill our minds. We lost the love of medicine. No wonder many of us become quite sad, grumpy, cynical old doctors.

If there is one challenge in this whole 31 Days to Better Doctoring Challenge that I hope every doctor would do, it would be this: The challenge to love your work. The challenge to fall in love with medicine and surgery all over again. The challenge to infuse more enthusiasm and love into everything we do. The challenge to love what we do. I could almost guarantee that the more you love your work, the happier you would be and the better your work would be.

So today, I challenge you to fall in love all over again with your work.

### *Done.*

If you have traveled with me this far, I sincerely thank you. I hope you have had as much fun as I had in going through these little daily challenges. Let me recall, that these exercises were written just for me, so I can push myself to be a better doctor. Not in terms of knowledge, but as a person, a colleague, a worker, a public servant. I hope you had enjoyed the thoughts behind these challenges as well.

Thanks again for traveling with me this far. To my dear friends on Twitter and blogosphere who had conversed with me along the way, a sincere thanks. It is really encouraging to see that there are many people out there wanting to make a difference wherever they are. I salute you for your hard work.